

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)						BERIAL NO. <i>10/725405</i>	FILING DATE		
						APPLICANT(S)			
						CLAIMS			
NO.	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		NO.		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.
1	/						51		
2	/						52		
3	/						53		
4	/						54		
5	/						55		
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42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	6						TOTAL IND.		
TOTAL DEP.	18						TOTAL DEP.		
TOTAL CLAIMS	24						TOTAL CLAIMS		

PTO-1360 (3-76)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE

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